

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MA</i>	67614	4/12/00
O.I.P.E. CLASSIFIER	<i>MA</i>	3	5/1
FORMALITY REVIEW	<i>MA</i>	JC 640	06/19/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	1/1
2	2/2
3	3/3
4	4/4
5	5/5
6	6/6
7	7/7
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42	42/42
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48	48/48
49	49/49
50	50/50

Claim	Date
Final Original	
51	51/51
52	52/52
53	53/53
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Claim	Date
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If more than 150 claims or 10 actions  
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